

## MEMORANDUM

To: Vermont Children's Performance Indicator Project Advisory Group

From: John Pandiani  
Brad James

Date: July 31, 1997

Re: SRS Cases per Capita

The attached report presents data on the FY1997 caseload for each SRS region in Vermont. This report follows the earlier reports on community mental health and special education caseloads, and the reports on expenditures for community mental health, special education, and SRS services to children and adolescents. Next week we will distribute data on access to inpatient behavioral health care by Vermont children and adolescents.

Please contact us with any suggestions or comments you may have. We will share them with the rest of the Advisory Group. We look forward to your comments on the quality of the data, the appropriateness of the analysis, and the effectiveness of the data presentation as well as your interpretation of the results.

## **Access to Mental Health Services SRS Cases per Capita FY1997**

**QUESTION:** Does the number of children and adolescents who are served by SRS vary substantially among Vermont's twelve SRS districts?

**DATA:** Information on the number of children and adolescents less than 22 years of age who were served by SRS during 1997 was provided by the Vermont Department of Social and Rehabilitation Services. Regional population figures for children and adolescents less than 18 years old in each of Vermont's twelve SRS areas were obtained from the Vermont Department of Health and the Center for Rural Studies at the University of Vermont.

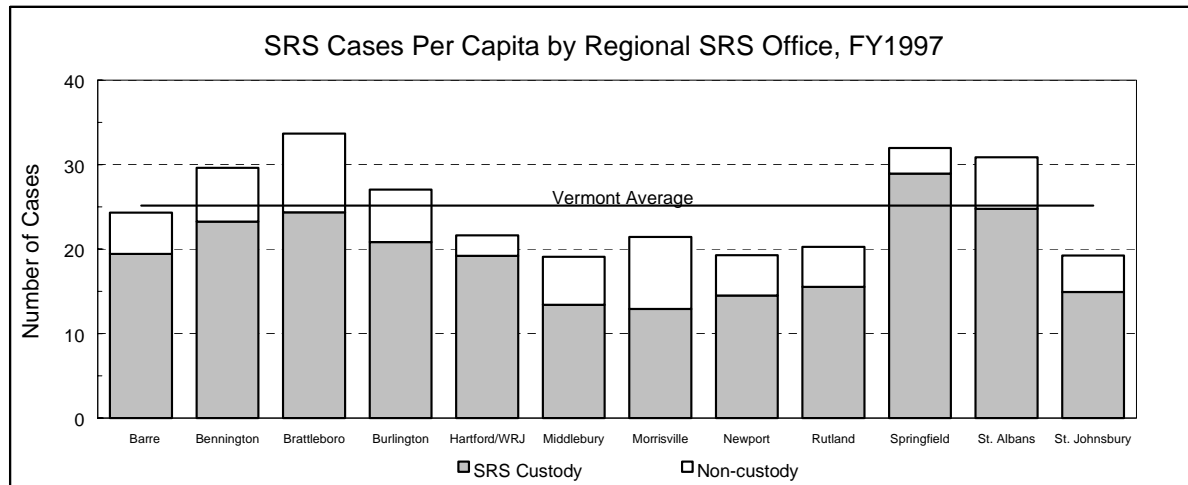
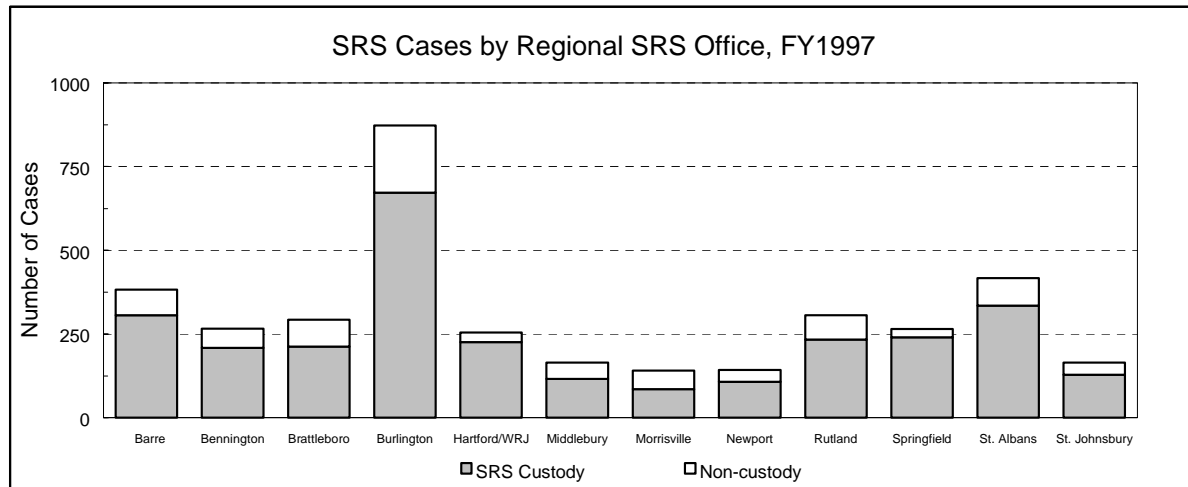
The data describes all cases substantiated by SRS. A substantiated case is one where SRS found allegations of neglect or abuse to be true after an investigation. Victims in these cases were either taken into custody or classified as "unassigned".

**ANALYSIS:** Cases per capita were calculated by determining the number of children and adolescents in each SRS regional area and dividing the number of substantiated cases by that number. The result was multiplied by 1,000 to provide a per capita rate per 1,000 children and adolescents for each regional SRS area. Per capita rates shown compare the caseload of individuals under 22 years of age to regional populations under 18 years of age. When current regional populations under 22 years of age are obtained, an updated analysis and graph will be mailed.

**RESULTS:** There is a substantial variation among the twelve SRS regions in the number of cases per capita. The Brattleboro region had the highest per capita caseload (34 cases per 1,000 children and adolescents) followed by the Springfield and St. Albans regional areas (32 and 31 per 1,000 respectively). The Middlebury, Newport, and St. Johnsbury regional areas had the lowest per capita caseloads (19 cases per 1,000 children and adolescents each).

**NEXT QUESTION:** How do these regional differences in SRS cases per capita relate to previously reported SRS expenditures per capita (July 1, 1997)? Are these per capita custody rates similar to those found in other states? How do these rates compare to per capita utilization rates for community mental health children's services and special education services as previously reported (July 10 to 24, 1997)?

## SRS CASES PER CAPITA BY REGIONAL OFFICES, FY1997



SRS Regional Office	SRS Regional Population	Total SRS Cases <sup>1</sup>	Custody Cases <sup>1</sup>	Unassigned Cases <sup>2</sup>	SRS Cases per 1,000 Population
Barre	15,763	383	306	77	24
Bennington	8,985	266	209	57	30
Brattleboro	8,707	293	212	81	34
Burlington	32,264	873	672	201	27
Hartford/WRJ	11,779	255	226	29	22
Middlebury	8,652	165	116	49	19
Morrisville	6,579	141	85	56	21
Newport	7,370	142	107	35	19
Rutland	15,098	306	234	72	20
Springfield	8,292	265	240	25	32
St. Albans	13,517	417	335	82	31
St. Johnsbury	8,576	165	128	37	19
Vermont	145,582	3,660	2,828	801	25

SRS case numbers for FY1997 were obtained from the Vermont Department of Social and Rehabilitation Services. All population figures and counts include only children and adolescents less than 18 years of age. Regional populations are projections for 1995 based on the latest estimates published by the Vermont Department of Health and the Center for Rural Studies at the University of Vermont.

<sup>1</sup> Case numbers for each SRS region count each child or adolescent only once in a given region. If an individual is provided service in more than one region, he/she is counted once for each region. The Vermont totals represent an unduplicated count of individuals served by SRS and are not necessarily the sum of the regional areas.

<sup>2</sup> Cases classified as 'Unassigned' are cases where SRS intervened but did not place the child in custody.